Complete Summary

TITLE

Heart failure: percent of patients discharged home with written instructions or educational material given to patient or care giver at discharge or during the hospital stay addressing all of the following: activity level, diet, discharge medications, follow-up appointment, weight monitoring, and what to do if symptoms worsen.

SOURCE(S)

Specifications manual for national hospital quality measures, version 1.04. Centers for Medicare and Medicaid Services (CMS), Joint Commission on Accreditation of Healthcare Organizations (JCAHO); 2005 Aug. various p.

Measure Domain

PRIMARY MEASURE DOMAIN

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the <u>Measure Validity</u> page.

SECONDARY MEASURE DOMAIN

Does not apply to this measure

Brief Abstract

DESCRIPTION

This measure is used to assess the percent of heart failure patients discharged home with written discharge instructions or educational material given to patient or caregiver at discharge or during the hospital stay addressing all of the following: activity level, diet, discharge medications, follow-up appointment, weight monitoring, and what to do if symptoms worsen.

The data elements for each of the six discharge instruction elements provide the opportunity to assess each component individually. However, completion of all six instruction categories is required for this composite measure.

RATIONALE

Patient non-compliance with diet and medications is an important reason for changes in clinical status. Health care professionals should ensure that patients and their families understand their dietary restrictions, activity recommendations, prescribed medication regimen, and the signs and symptoms of worsening heart failure. National guidelines strongly support the role of patient education. Despite this recommendation, comprehensive discharge instructions are rarely provided to older patients hospitalized with heart failure.

PRIMARY CLINICAL COMPONENT

Heart failure; discharge instructions or educational material (activity level, diet, discharge medications, follow-up appointment, weight monitoring, and what to do if symptoms worsen)

DENOMINATOR DESCRIPTION

Heart failure patients discharged to home or home care (see the related "Denominator Inclusions/Exclusions" field in the Complete Summary)

NUMERATOR DESCRIPTION

Heart failure patients with documentation that they or their caregivers were given written discharge instructions or other educational material addressing all of the following:

- activity level
- diet
- discharge medications
- follow-up appointment
- weight monitoring
- what to do if symptoms worsen

Evidence Supporting the Measure

EVIDENCE SUPPORTING THE CRITERION OF QUALITY

 A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Overall poor quality for the performance measured

EVIDENCE SUPPORTING NEED FOR THE MEASURE

Specifications manual for national hospital quality measures, version 1.04. Centers for Medicare and Medicaid Services (CMS), Joint Commission on Accreditation of Healthcare Organizations (JCAHO); 2005 Aug. various p.

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

Accreditation
Collaborative inter-organizational quality improvement
Internal quality improvement
Pay-for-performance

Application of Measure in its Current Use

CARE SETTING

Hospitals

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Measure is not provider specific

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Single Health Care Delivery Organizations

TARGET POPULATION AGE

Age greater than or equal to 18 years

TARGET POPULATION GENDER

Either male or female

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

Nearly 5 million patients in the United States (U.S.) have heart failure (HF), and approximately 500,000 to 900,000 new cases are diagnosed each year.

EVIDENCE FOR INCIDENCE/PREVALENCE

Hunt SA, Baker DW, Chin MH, Cinquegrani MP, Feldman AM, Francis GS, Ganiats TG, Goldstein S, Gregoratos G, Jessup ML, Noble RJ, Packer M, Silver MA, Stevenson LW. ACC/AHA guidelines for the evaluation and management of chronic heart failure in the adult. Bethesda (MD): American College of Cardiology Foundation (ACCF); 2001 Sep. 56 p. [573 references]

ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

BURDEN OF ILLNESS

Unspecified

UTILIZATION

Unspecified

COSTS

Heart failure (HF) is the most common Medicare diagnosis-related group, and more Medicare dollars are spent for the diagnosis and treatment of HF than for any other diagnosis.

EVIDENCE FOR COSTS

Hunt SA, Baker DW, Chin MH, Cinquegrani MP, Feldman AM, Francis GS, Ganiats TG, Goldstein S, Gregoratos G, Jessup ML, Noble RJ, Packer M, Silver MA, Stevenson LW. ACC/AHA guidelines for the evaluation and management of chronic heart failure in the adult. Bethesda (MD): American College of Cardiology Foundation (ACCF); 2001 Sep. 56 p. [573 references]

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Living with Illness

IOM DOMAIN

Effectiveness Patient-centeredness

Data Collection for the Measure

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

Discharges, 18 years and older, with a principal diagnosis of heart failure

DENOMINATOR SAMPLING FRAME

Patients associated with provider

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

Discharges with an International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) Principal Diagnosis Code for heart failure as defined in Appendix A of the original measure documentation, who are discharged to home or home care

Exclusions

- Patients less than 18 years of age
- Patients who had a left ventricular assistive device (LVAD) or heart transplant procedure during the hospitalization (ICD-9-CM procedure code for LVAD and heart transplant as defined in Appendix A of the original measure documentation)

DENOMINATOR (INDEX) EVENT

Clinical Condition Institutionalization

DENOMINATOR TIME WINDOW

Time window is a single point in time

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions

Heart failure patients with documentation that they or their caregivers were given written discharge instructions or other educational material addressing all of the following:

- activity level
- diet
- discharge medications
- follow-up appointment
- weight monitoring
- what to do if symptoms worsen

Exclusions

None

NUMERATOR TIME WINDOW

Institutionalization

DATA SOURCE

Administrative and medical records data

LEVEL OF DETERMINATION OF QUALITY

Individual Case

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Rate

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Unspecified

STANDARD OF COMPARISON

External comparison at a point in time External comparison of time trends Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

The core measure pilot project was a collaboration among the Joint Commission, five state hospitals associations, five measurement systems, and 83 hospitals from across nine states. Participating hospitals collected and reported data for heart failure (HF) measures from December 2000 to December 2001.

Core measure reliability visits were completed the summer of 2001 at a random sample of 16 participating hospitals across 6 states.

During the pilot project, several participants believed this measure afforded them the greatest opportunity for quality improvement initiatives within their institution. This is substantiated by the overall pilot project data; the mean rate for this measure was 28%.

EVIDENCE FOR RELIABILITY/VALIDITY TESTING

Joint Commission on Accreditation of Healthcare Organizations (JCAHO). A comprehensive review of development and testing for national implementation of hospital core measures. Oakbrook Terrace (IL): Joint Commission on Accreditation of Healthcare Organizations (JCAHO); 40 p.

Identifying Information

ORIGINAL TITLE

HF-1: discharge instructions.

MEASURE COLLECTION

National Hospital Quality Measures

MEASURE SET NAME

Heart Failure

SUBMITTER

Centers for Medicare & Medicaid Services Joint Commission on Accreditation of Healthcare Organizations

DEVELOPER

Centers for Medicare and Medicaid Services/Joint Commission on Accreditation of Healthcare Organizations

ENDORSER

National Quality Forum

INCLUDED IN

Hospital Compare Hospital Quality Alliance

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

2000 Aug

REVISION DATE

2005 Aug

MEASURE STATUS

Please note: This measure has been updated. The National Quality Measures Clearinghouse is working to update this summary.

SOURCE(S)

Specifications manual for national hospital quality measures, version 1.04. Centers for Medicare and Medicaid Services (CMS), Joint Commission on Accreditation of Healthcare Organizations (JCAHO); 2005 Aug. various p.

MEASURE AVAILABILITY

The individual measure, "HF-1: Discharge Instructions," is published in "Specifications Manual for National Hospital Quality Measures." This document is available from the <u>Joint Commission on Accreditation of Healthcare Organizations (JCAHO) Web site</u>. Information is also available from the <u>Centers for Medicare & Medicaid Services (CMS) Web site</u>. Check the JCAHO Web site and CMS Web site regularly for the most recent version of the specifications manual and for the applicable dates of discharge.

COMPANION DOCUMENTS

The following are available:

- A software application designed for the collection and analysis of quality improvement data, the CMS Abstraction and Reporting Tool (CART), is available from the <u>CMS CART Web site</u>. Supporting documentation is also available. For more information, e-mail CMS PROINQUIRIES at proinquiries@cms.hhs.gov.
- Joint Commission on Accreditation of Healthcare Organizations (JCAHO). A comprehensive review of development and testing for national implementation of hospital core measures. Oakbrook Terrace (IL): Joint Commission on Accreditation of Healthcare Organizations (JCAHO); 40 p. This document is available from the JCAHO Web site.
- Joint Commission on Accreditation of Healthcare Organizations (JCAHO).
 Attributes of core performance measures and associated evaluation criteria.
 Oakbrook Terrace (IL): Joint Commission on Accreditation of Healthcare
 Organizations (JCAHO); 5 p. This document is available from the <u>JCAHO Website</u>.
- Hospital compare: a quality tool for adults, including people with Medicare.
 [internet]. Washington (DC): U.S. Department of Health and Human Services;

2005 [updated 2005 Sep 1]; [cited 2005 Apr 15]. This is available from the Medicare Web site.

NQMC STATUS

This NQMC summary was completed by ECRI on February 7, 2003. The information was verified by the Centers for Medicare/Medicaid Services and the Joint Commission on Accreditation of Healthcare Organizations on February 12, 2003. This NQMC summary was updated by ECRI on October 11, 2005. The information was verified by the measure developer on December 12, 2005.

COPYRIGHT STATEMENT

The Specifications Manual for National Hospital Quality Measures [Version 1.04, August, 2005] is the collaborative work of the Centers for Medicare & Medicaid Services and the Joint Commission on Accreditation of Healthcare Organizations. The Specifications Manual is periodically updated by the Centers for Medicare & Medicaid Services and the Joint Commission on Accreditation of Healthcare Organizations. Users of the Specifications Manual for National Hospital Quality Measures should periodically verify that the most up-to-date version is being utilized.

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